

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0878011	BREEZY KNOLL ASSOCIATION			C	100	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			25				

Towns Served: LITCHFIELD, MORRIS

### Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094)		1 routine (RT) per nine years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/14 - 12/31/22		
Total Coliform (3100)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/17 - 12/31/19	6/1-9/30	
	1/1/20 - 12/31/22	6/1-9/30	
Physical Parameters (PPS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Net Gross Alpha (4000)		1 routine (RT) per six years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/14 - 12/31/19		
	1/1/20 - 12/31/25		
Uranium (4006)		1 routine (RT) per six years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/14 - 12/31/19		
	1/1/20 - 12/31/25		
Combined Radium-226/228 (4010)		1 routine (RT) per six years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/14 - 12/31/19		
	1/1/20 - 12/31/25		
Inorganic Chemicals (IOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		
Nitrate And Nitrite (NOX)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete

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Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			25				

Towns Served: LITCHFIELD, MORRIS

### Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

Nitrate And Nitrite (NOX)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		

Water System Facility: WELL 1 (WSF ID: 1544)

E. Coli (3014)		1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
WELL (2)	10/1/18 - 12/31/18		Complete	
	1/1/19 - 3/31/19		Complete	
	4/1/19 - 6/30/19			
	7/1/19 - 9/30/19			

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT CCR TO THE DEPARTMENT	6/30/2019	
SUBMIT CCR CERTIFICATION FORM	8/9/2019	
CROSS CONNECTION EXEMPTION	3/1/2024	

### Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		BREEZY001	BREEZY400	A	Y	3		
		BREEZY002	BREEZY402	A	Y	3		
		BREEZY003	BREEZY404	A	Y	3	Y	
		BREEZY004	BREEZY406	A	Y	3		
		BREEZY005	BREEZY408	A	Y	3		
		BREEZY006	BREEZY410	A	Y	3		
		BREEZY007	BREEZY412	A	Y	3		
		BREEZY008	BREEZY414	A	Y	3		
		BREEZY009	BREEZY416	A	Y	3		
		BREEZY010	BREEZY418	A	Y	3		
		BREEZY011	BREEZY420	A	Y	3		

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0878011	BREEZY KNOLL ASSOCIATION			C	100	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			25				

Towns Served: LITCHFIELD, MORRIS

### Water System Facility and Sampling Point Inventory

<i>Water System Facility ID</i>	<i>Water System Facility</i>	<i>Sampling Point ID</i>	<i>Sampling Point Description</i>	<i>Status</i>	<i>Total Coliform Rule</i>	<i>Lead and Copper Rule Tier</i>	<i>Asbestos</i>	<i>Stage WQP 2 DBPR</i>
		BREEZY012	BREEZY422	A	Y	3		
		BREEZY013	BREEZY424	A	Y	3		
		BREEZY014	BREEZY426	A	Y	3		
		BREEZY015	BREEZY428	A	Y	3		
		BREEZY016	BREEZY430	A	Y	3		
		BREEZY017	BREEZY432	A	Y	3		
		BREEZY018	BREEZY434	A	Y	3		
		BREEZY019	BREEZY436	A	Y	3		
		BREEZY020	BREEZY443	A	Y	3		
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				
1544	WELL 1	2	WELL	A				
47131	PRESSURE TANK							

### Certified Operator Information

**Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)**

**Facility Classification:** SMALL WATER SYSTEM

<i>Operator Name</i>	<i>Operator Type</i>	<i>Certification(s)</i>	<i>Certification Expiration</i>
BLACK, RON W.	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS II	6/30/2020
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2020
GIORDANO, DAVID S.	ASSIGNED OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	6/30/2020
		DISTRIBUTION SYSTEM OPERATOR - CLASS II	6/30/2020

### Contact Information

Name		Organization		Job Title		
<b>Breezy Knoll Association Incorporated</b>						
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
58 Moran Street		C/O Jacob Hyner		Waterbury	CT	06704
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
212-755-3063						

**Contact Role(s): Owner**

Name		Organization		Job Title		
<b>Mr. Mike Held</b>		Breezy Knoll Association				
Mailing Address Line One		Mailing Address Line Two		City	State	Zip Code
469 8Th St				Brooklyn	NY	11215
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address	
646-468-7388				646-468-7388	mikeheld1@gmail.com	

**Contact Role(s): Administrative Contact, Legal Contact**

*NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.*

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0878011	BREEZY KNOLL ASSOCIATION			C	100	P	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
			25				

Towns Served: LITCHFIELD, MORRIS

**Please note the following:**

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

***If you have any questions, please contact the Drinking Water Section at (860) 509-7333.***

***<http://www.ct.gov/dph/publicdrinkingwater>***

***End of schedule***

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0878021	ELDRIDGE ELDERLY HOUSING			C	40	L	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
109 EAST ST (RT 109)			21				

Towns Served: MORRIS

### Monitoring Requirements

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Asbestos (1094)		1 routine (RT) per nine years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/13 - 12/31/21		
Total Coliform (3100)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine (RT) per six months	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	7/1/18 - 12/31/18		Complete
	1/1/19 - 6/30/19		
	7/1/19 - 12/31/19		
Physical Parameters (PPS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT - WELLS 2, 3, & 4 (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EP - WELLS 2, 3, & 4 (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Nitrate And Nitrite (NOX)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EP - WELLS 2, 3, & 4 (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Radionuclides - Gross Alpha, Combined Radium & Uranium (RADA)		1 routine (RT) per six years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EP - WELLS 2, 3, & 4 (3)	1/1/17 - 12/31/22		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EP - WELLS 2, 3, & 4 (3)	1/1/17 - 12/31/19		Complete
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 routine (RT) per quarter	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
EP - WELLS 2, 3, & 4 (3)	10/1/18 - 12/31/18		Complete

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0878021	ELDRIDGE ELDERLY HOUSING			C	40	L	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
109 EAST ST (RT 109)				21				

Towns Served: MORRIS

### Monitoring Requirements

Water System Facility: ENTRY POINT - WELLS 2, 3, & 4 (WSF ID: 00700)

Organic Chemicals (VOCS)	1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/30/2016	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	9/28/2016	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	3/31/2019	
SUBMIT CCR TO THE DEPARTMENT	6/30/2019	
SUBMIT CCR CERTIFICATION FORM	8/9/2019	
CROSS CONNECTION SURVEY REPORT	3/1/2020	

### Public Notification Requirements

Violation/Situation	Compliance Period	Notice Tier	Public Notification Required	Public Notification Performed	PN Certification Due to DPH	PN Certification Received
Di(2-Ethylhexyl) - Phthalate M&R Violation	7/1/10 - 9/30/10	3	12/30/2011		1/9/2012	

### Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		ELD001	SENIOR CTR KITCHEN	A	Y	N		
		ELD002	UNIT #1	A	Y	N		
		ELD003	UNIT #5	A	Y	N		
		ELD004	UNIT #15	A	Y	N		
		ELD005	UNIT #17	A	Y	N		
		ELD006	UNIT #21	A	Y	N		
		ELD007	MENS BATH LEFT SINK	A		N		
		ELD008	MENS BATH SINK RIGHT	A		N		
		ELD009	DRINKING FOUNTAIN	A	Y	N		
		ELD010	WOMEN BATH SINK LEFT	A		N		
		ELD011	WOMEN BATH SINK RIGH	A		N		
		ELD012	UTILITY SINK	A	Y	N		
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT - WELLS 2, 3, & 4	3	EP - WELLS 2, 3, & 4	A				
1543	WELL 2	2	WELL 2	A				

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source
CT0878021	ELDRIDGE ELDERLY HOUSING			C	40	L	GW
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
109 EAST ST (RT 109)			21				

Towns Served: MORRIS

### Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
50951	ATMOSPHERIC STORAGE							
50953	PRESSURE STORAGE							
50955	ELDRIDGE TREATMENT PLANT							
55144	WELL 3	2	WELL 3	A				
59706	WELL 4	2	WELL 4	A				

### Certified Operator Information

Water System Facility: **ELDRIDGE TREATMENT PLANT (WSF ID: 50955)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
GRELA, GEORGE	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS I	9/30/2020

### Contact Information

Name		Organization		Job Title	
<b>Mr. Tom Weik</b>		Town of Morris		First Selectman	
Mailing Address Line One		Mailing Address Line Two		City	State Zip Code
Morris Community Hall		3 East Street, P.O. Box 66		Morris	CT 06763-0066
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
860-567-7430		860-567-7432			1stselectman@townofmorrisct.com

Contact Role(s): **Administrative Contact, Legal Contact**

Name		Organization		Job Title	
<b>Town of Morris Elderly Housing</b>					
Mailing Address Line One		Mailing Address Line Two		City	State Zip Code
109 East Street				Morris	CT 06763
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address

Contact Role(s): **Owner**

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- The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
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